

ANNUAL RECOVERY WELL REPORT

RW - SUMMARY 2002

PERMIT HOLDER

PERMIT NUMBER

LONG TERM STORAGE ACCOUNT NUMBER

REPORTING PARTY

If any of the information preprinted on this report is incorrect, please make the necessary changes.

PART I WATER RECOVERED

- | | | |
|---|----------------------|-------------|
| A) Total volume of water in acre-feet recovered as annual recovery from box 10 of RW - SCHEDULE 74: | <input type="text"/> | ACRE - FEET |
| B) Total volume of water in acre-feet recovered as Long Term Storage credits from box 11 of RW - SCHEDULE 74: | <input type="text"/> | ACRE - FEET |
| C) Total volume of water recovered in acre-feet from box 12: | <input type="text"/> | ACRE - FEET |

PART II LONG TERM STORAGE RECOVERY FEE

Enter volume from Part I.B. above:

<input type="text"/>	X	<input type="text" value="\$1.00"/>	=	<input type="text" value="\$"/>
ACRE - FEET		FEE		TOTAL

PART III LATE FEES

Complete this section if filing after March 31.

Note: A portion of a month after March 31 is counted as a full month.

- | | | | | | |
|---|----------------------|--|---------------------------------|--|---------------------------------|
| A) Enter number of months late (Maximum of 6) | <input type="text"/> | B) Calculate Late Report Fee (\$25.00 X number of months late) | <input type="text" value="\$"/> | C) Calculate Late Payment Fee (Recovery fee calculated in Part II X 10% X number of months late) | <input type="text" value="\$"/> |
|---|----------------------|--|---------------------------------|--|---------------------------------|

PART IV TOTAL FEES DUE

Total fees due (Part II + Part III.B + Part III.C):

Mail or hand deliver this report, together with the appropriate schedules, worksheets, and fees to the Arizona Department of Water Resources. If mailed, the report must be postmarked no later than March 31, 2003. If hand delivered, the report must be received by the Department's Records Management Unit or local AMA office no later than 5:00 PM on March 31, 2003.

REPORTS FILED AFTER MARCH 31, 2003 ARE SUBJECT TO LATE FEES [ARS § 45-875.01(E)].

I hereby certify, under penalty of perjury, that the information contained in this report is, to the best of my knowledge and belief, true, correct and complete.

X

AUTHORIZED SIGNATURE

TITLE

DATE

PRINTED NAME

TELEPHONE NUMBER

NOTE: THIS REPORT MUST BE FILED EVEN IF NO WATER WAS DELIVERED PURSUANT TO THE PERMIT

